FOR IMMEDIATE RELEASE

PSC TO VOTE ON FUNDING A STATEWIDE TELE-HEALTH NETWORK

LINCOLN – The Nebraska Public Service Commission will determine whether to contribute \$900,000 annually from the Nebraska Universal Service Fund to the state's Tele-Health network at its weekly meeting next Wednesday in Lincoln.

The Commission conducted a public hearing September 1 on the plan that would link 79 Nebraska hospitals with one another through telecommunications and video conferencing. At the close of the meeting, Commissioner Jerry Vap of McCook, chairman of the PSC, said he is considering moving the Tele-Health proposal to the top of the agenda for the Commission's weekly meeting September 8, which will begin at 10 a.m. in the Commission Hearing Room on the third floor of the Atrium in downtown Lincoln at 12th and N Streets.

Senior Vice President Advocacy Roger Keetle and other officials of the Nebraska Hospital Association appeared at the hearing to summarize the Tele-Health plan which calls for eight hub hospitals across the state and links to other hospitals with most costs to be funded by the Nebraska Universal Service Fund and several federal programs. The proposal calls for the Public Service Commission to commit \$900,000 annually for monthly connection charges, equipment charges, and one-time connection charges.

Jeff Pursley, director of the Commission's Universal Service Fund Department said the 2004-2005 fiscal year would require \$916,854.20 and an annual appropriation from the Universal Service Fund of \$824,595.34 in subsequent years.

The immediate goal of Tele-Health, according to Dave Glover of the Nebraska Hospital Association, is to connect the state's hospitals into a single system that can provide patient clinical consultation, provide continuing education and professional development for health care providers, emergency and trauma care, and provide administrative links.

Eventually, he said, Tele-Health would also be connected to the state's 26 public health agencies, state government, and the state and regional bioterrorism labs to facilitate emergency alert capabilities.

Hub sites for the network are: St. Francis Regional Medical Center in Grand Island, Good Samaritan Health Systems in Kearney, BryanLGH Regional Medical Center in Lincoln, St. Elizabeth Regional Medical Center in Lincoln, Faith Regional Medical Center in Norfolk, Great Plains Regional Medical Center in North Platte, the University of Nebraska Medical Center in Omaha, and Regional West Medical Center in Scottsbluff.

Federal funds are available only for rural hospitals, classified by the federal government as all non-Omaha and Lincoln hospitals in the state. Veterans Affairs hospitals and the Bureau of Indian Affairs hospital in Winnebago are not included in the plan, although commissioners asked the Nebraska Hospital Association to investigate the possibility of including the Winnebago facility.

###